SEP 2 3 2005

PTO/SB/21 (09-04)

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2 3 2005 2		PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031						
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Under the Paperwork Reduction Act of 1995, no	Application Number	ection of information unless it displays a valid OMB control number. 10/092,010						
TRANSMITTAL	Filing Date	March 5, 2002						
FORM	First Named Inventor	Bloch						
2 2 3 3 3 3	Art Unit	2142						
(to be used for all correspondence after initial filin	Examiner Name	Hollar, Andrea B.						
Total Number of Pages in This Submission	Attorney Docket Number	LZLO-01001US0						
ENCLOSURES (Check all that apply)								
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	Status Letter Other Enclosure(s) (please Identify below): Credit Card Payment Form						
SIGNATU	JRE OF APPLICANT, ATTO	RNEY, OR AGENT						
Firm Name Vierra Magen Marcus I	Harmon & DeNiro LLP							
Signature	les than							
Printed name Burt Magen								
Date September	21, 2005	Reg. No. 37,175						
CERTIFICATE OF TRANSMISSION/MAILING								
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Signature //	enthos -							
Typed or printed name Burt Magen		Date 9/21/05						
		1 1 (811 03						

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(8)	tive on 12/08/2					Complete if h		
dursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10/092,010					
FEE TRANSMITTAL		_	Filing Date	_	March 5, 2002		<u> </u>	
For FY 2005		Ī	First Named Inve		Bloch			
				Examiner Name		Hollar, Andre	a R	
Applicant claims sma	Il entity statu	s. See 37 CFR 1.27		Art Unit	 1	2142		
TOTAL AMOUNT OF PAYMENT (\$) 225.00				Attorney Docket		LZLO-01001US0		
METHOD OF PAYMENT (check all that apply)								
	<u> </u>							
Check Credit			None	e Other (p		Vierra Ma	gen Ma	arcus
✓ Deposit Account						me: <u>Harmon</u> &	DeNir	ollP
For the above-iden	tified deposit	account, the Director i	is here	eby authorized to:	(check	all that apply)		
Charge fee(s	s) indicated b	elow		Charge	e fee(s)	indicated belov	v, exce	pt for the filing fee
		e(s) or underpayments	of fee	e(s) Credit	any ove	erpayments		
under 37 CF warning: Information on th	R 1.16 and 1 is form may b	l.17 ecome public. Credit ca	rd info	_	-		m. Prov	ide credit card
information and authorization	n on PTO-203	В.						
FEE CALCULATION								
1. BASIC FILING, SEA			ES					
FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type	Fee (\$)	Small Entity Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee	Small Enti (\$) Fee (\$)	īΑ	Fees Paid (\$)
Utility	300	150 5	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150 5	500	250	600	300		
Provisional	200	100	0	0	() 0		
2. EXCESS CLAIM FE	ES							mall Entity
Fee Description Fee (\$) Fee (\$)							·····	
Each claim over 20 (including Reissues)					50 200		25 100	
Each independent claim over 3 (including Reissues) Multiple dependent claims			·)			360		180
Total Claims Extra Claims Fee (\$) Fee Paid (\$)							endent Claims	
20 or HP = x50 =0						<u>\$)</u>	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the arm of setting and describes exceed 100 sheets of names (evaluding electronically filed sequence or computer								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra She		f eácl	<u>h additional 50 o</u> _ (round up to a v	<u>r fracti</u>		Fee (\$)	<u>Fee Paid (\$)</u>
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4. OTHER FEE(S) Non-English Specif	ication, \$	130 fee (no small er	ntity o	discount)				Fees Paid (\$)
Other (e.g., late filing	ng surcharg	e):2 month extension	fee					225

SUBMITTED BY				
Signature	Buthey	Registration No. (Attorney/Agent) 37,175	Telepho	ne 415-369-9660
Name (Print/Type)	Burt Magen		Date	9/21/2005

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